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(Requestor's Name)			
(Address)			
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PICK-UP WAIT	MAIL		
(Business Entity Name)		
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1 Ma	and of the limited lightlites commonly CONMARTZ HILL SPOR	OUGH PROPERTIES 11.0		
I. Na	me of the limited liability company: SCHWARTZ HILLSBOF	OUGH PROPERTIES, LLC		
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	ompany: 1004-A No. Lockwood Ridge Road		
	(Sarasota, Florida 34237		
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Same as above		
01/03/20		L08000000798		
3. Da	te of filing/registration in Florida	4. Document number	· 7	
5. (a)	Registered Agent and Registered Office shown on t	he records of the Florida Dept	YEST	
	Registered Agent:	Jeffrey S. Russell		
	Pagistared Office Address	240 S. Pineapple Avenue, 10th Floor	36 2 下	
	Registered Office Address:	Sarasota, Florida 34236		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	W Registered Office address	: 1 35	
	NEW Registered Agent:	Jan W. Pitchford	· · · · · · · · · · · · · · · · · · ·	
	NEW Registered Office Address:	240 S. Pineapple Avenue, 10th Floor		
	(MUST BE FLORIDA STREET ADDRESS)		DI avec	
		Sarasota	_,FL_34236	
confir and th liabilit the me the op	limited liability company is not organized under the lamed that after the change or changes are made, the Flee business office of the registered agent will be idently company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the regical. Or, in the case of a Florical.	istered office da limited	
Printed	or typed name of signee	2		
compl and I Chapt addre	by accept the appointment as registered agent and a y with the provisions of all statules relative to the production of am familiar with and accept the obligations of my poer 608, F.S. Or, if this document is being filed to me is. I hereby confirm that the limited liability company reor registered Agent. Division of Corporations, P.O. Box 63	per and complete performant sition as registered agent as p rely reflect a change in the re has been notified in writing o	further agree to se of my duties, rovided for in gistered office of this change.	
	FILING FEE: \$25.00			